

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. GP-303294 (8540R-000046)

First Inventor Chi-Hung Shen et al.

Title RECONFIGURABLE MECHANICAL FIXTURING PALLETS FOR ASSEMBLY LINES

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<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> <small>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</small>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>	
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages 21]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the Invention <input checked="" type="checkbox"/></li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> paper</li> </ul> c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C.113) <small>[Total Sheets 5]</small>		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
5. Oath or Declaration <small>[Total Pages 3]</small> <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d))  <small>(for a continuation/divisional with Box 18 completed)</small> </li> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b>  <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small> </li> </ul>		10. <input type="checkbox"/> 37 C.F.R.§3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee) Attorney</small>	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		11. <input type="checkbox"/> English Translation Document (if applicable)	
		12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
		13. <input type="checkbox"/> Preliminary Amendment	
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>	
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
		16. <input type="checkbox"/> Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
		17. <input type="checkbox"/> Other: _____	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-in-part (CIP)   
 Prior application information: Examiner \_\_\_\_\_ of prior application No. \_\_\_\_\_ / \_\_\_\_\_  
 Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here)		or <input checked="" type="checkbox"/> Correspondence address below	
Name	Kathryn A. Marra				
	General Motors Corporation				
Address	Legal Staff - Mail Code 482-C23-B21				
	P. O. Box 300				
City	Detroit		State	MI	Zip Code
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Signature				Date	34,811
				Nov 25 03	

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# FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 1094)*Complete if Known*

Application Number	N/A
Filing Date	N/A
First Named Inventor	Chi-Hung Shen
Examiner Name	N/A
Art Unit	N/A
Attorney Docket No.	GP-303294 (8540R-000046)

**METHOD OF PAYMENT (check all that apply)**
 Check  Credit card  Money  Other  None  
 Order
 Deposit Account:

Deposit Account Number	07-0960
Deposit Account Name	General Motors Corporation

## The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee Description	
1001	2001	Utility filing fee	770
1002	2002	Design filing fee	
1003	2003	Plant filing fee	
1004	2004	Reissue filing fee	
1005	2005	Provisional filing fee	

**SUBTOTAL (1)**

(\$ 770)

**2. EXTRA CLAIM FEES**

		Extra Claims	Fee from below	Fee Paid
Total Claims	31	-20 **	= 11	X 18 = 198
Independent Claims	4	-3 **	= 1	X 86 = 86
Multiple Dependent			X	= 0

**Large Entity**

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee Description
1202	2202	Claims in excess of 20
1201	2201	Independent claims in excess of 3
1203	2203	Multiple dependent claim, if not paid
1204	2204	** Reissue independent claims over original patent
1205	2205	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)**

(\$ 284)

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee Description	
1051	130	Surcharge - late filing fee or oath	
1052	50	Surcharge - late provisional filing fee or cover sheet	
1053	130	Non-English specification	
1812	2,520	For filing a request for reexamination	
1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	Extension for reply within first month	
1252	420	Extension for reply within second month	
1253	950	Extension for reply within third month	
1254	1,480	Extension for reply within fourth month	
1255	2,010	Extension for reply within fifth month	
1401	330	Notice of Appeal	
1402	330	Filing a brief in support of an appeal	
1403	290	Request for oral hearing	
1451	1,510	Petition to institute a public use proceeding	
1452	110	Petition to revive – unavoidable	
1453	1,330	Petition to revive – unintentional	
1501	1,330	Utility issue fee (or reissue)	
1502	480	Design issue fee	
1503	640	Plant issue fee	
1460	130	Petitions to the Commissioner	
1807	50	Processing fee under 37 CFR 1.17 (q)	
1806	180	Submission of Information Disclosure Stmt	
8021	40	Recording each patent assignment per property (times number of properties)	40
1809	770	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	Request for Continued Examination (RCE)	
1802	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

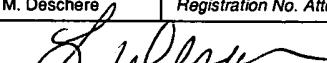
\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)**

(\$ 40)

\*\* or number previously paid, if greater; For Reissues, see above

**SUBMITTED BY***Complete (if applicable)*

Name (Print/Type)	Linda M. Deschere	Registration No. Attorney/Agent)	34,811	Telephone	(248) 641-1600
Signature				Date	NOV 25 03

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